



A CASE STUDY ON AYURVEDIC MANAGEMENT OF SHWITRA KUSHTA W.R.T VITILIGO

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ABSTRACT

Vitiligo is an autoimmune skin disorder characterized by the development of de-pigmented patches on the skin. This case study aims to provide a comprehensive overview of vitiligo through the examination of a representative patient's journey, from diagnosis to management and the psychological impact of the condition. The patient, a 4-year-old boy, initially presented with de-pigmented patches on his upper lip. Clinical examination and skin biopsies confirmed the diagnosis of vitiligo. Subsequently, the case study delves into the various management options available for vitiligo. Moreover, the psychological impact of vitiligo on the patient's quality of life is addressed in detail. The emotional and social challenges faced by individuals with vitiligo, including stigma and self-esteem issues, are examined. Psychosocial support and counseling, as well as interventions to improve body image and self-confidence, play a pivotal role in enhancing the overall well-being of vitiligo patients. In Ayurveda, the de pigmentation of skin is referred as *Shwitra*. This word is derived from Shweta in Sanskrit, which means white patch. Prabha of skin is due to Bhrajak Pitta. All skin disease comes under *Kushta Roga* and *Shwitra* is one of them. *Shwitra* is mention in *Kushta Roga Chikitsa* where white patches appear on the whole body or a local region. In conclusion, this case study underscores the multidimensional nature of *Shwitra*, encompassing medical, psychological and social aspects. It emphasizes the importance of early diagnosis, individualized treatment and psychosocial support in managing *Shwitra* effectively and improving the patient's overall quality of life. Furthermore, it underscores the need for continued research and awareness campaigns to reduce the stigma associated with this condition and promote a more inclusive society for individuals living with vitiligo.

KEYWORDS: Shwitra, Swayambhu Guggulu, Khadirarishta, Mandukparni Churna, Bakuchi Churna, Krushna Tulsi Churna, Somraji Oil

INTRODUCTION

The skin covers the entire external surface of the human body and primary point of contact with the outside world. Vitiligo is a common, slowly progressive acquired condition caused by focal loss of melanocytes within the skin resulting in the development of well circumscribed white patches due to hypopigmentation¹. Due to its characteristic appearance of white patches on the skin because of melanocyte deficit are called as *Shwitra* in Ayurveda. All kinds of skin diseases come under *Kushta Roga* in Ayurveda and *Shwitra* as one type of *Kushtaroga*^{2,3}. The word *Shwitra* has origin in the Sanskrit word Shweta, which means white patch⁴. *Shwitra* is a most common pigmentary disorder of the skin, which is induced by the vitiation of Tridoshas as well as Dhatus such as Rasa, Rakta, Mamsa, Meda⁵. *Shwitra* can be caused by impairment of the Bhrajaka Pitta, Vata, and Kapha dosha⁶. In Ayurveda one of the major cause for the disease is believed to be Purva Janma Krita Paapa karma⁷. The worldwide prevalence of 1% in India or some dermatological records show the incidence of vitiligo as high as 8.8%⁸. In which about 25% of the world's population, both adults and children are affected by this disease and causing disfigurement and serious disturbances in quality of life. Basic treatment of vitiligo in modern medical science is tropical creams, corticosteroids, radiations therapy, skin grafting etc which is an economic burden to the patient.

AIMS AND OBJECTIVES

To evaluate the effects of Ayurvedic medications in the management of Shwitra

CASE REPORT

A 4 years old male child patient visited OPD of Kayachikitsa at Shri Ayurvedic College, Nagpur with complaints of white patches over the region of face, front and inner side of upper and lower lip with clear cut layer of white patches from last 1 year.

Initially lesions were small and isolated, later progressively increased in size. The patient tookss allopathic medication for the period of 3-4 months without any definite improvement. As per classical signs and symptoms, the patient was diagnosed as a case of Shiwtra

History of Present Illness: The patient appeared to be normal until about 1 and half years ago, when the symptoms start appearing with patches of depigmentation on both upper and lower lip of the face. The number, size and area of depigmented patches grew in size, area and with clearly marked boundaries with time. No hair depigmentation was observed in the afflicted areas. Initially the patient received allopathic treatment, which did not stop the condition from worsening. After obtaining no any significant improvement the patient came for Ayurveda treatment.

Past History: No History of above skin complaints before 1 and half year.
No History Thyroid/ DM disorder.

Family History: There was no family history of similar skin disease.

Local Examination

1. Site of lesion: Front and inner side of upper and lower lip
2. Distribution: Symmetrical
3. Itching: Mildly present
4. Discharge: Absent
5. Sensation: Present
6. Character of lesion: White coloured grouped and diffused lesion
7. Inflammation: Absent
8. Severity: Mild
9. Inflammation: Absent

Personal History

1. Bowel: irregular bowel habits, mild constipation, not clear motion
2. Bladder: frequency 5-6 times a day with no nocturnal micturition.
3. Sleep: Not Disturbed
4. Diet: Mixed, excessive intake of Fish and Curd, Meat eating twice in a month, regularly

General Examination

Pallor: Mildly Present
 Icterus: Absent
 Cyanosis: Absent
 Clubbing: Absent
 Lymph node: Not palpable
 Pulse: 110/min.

Astha Vidha Pariksha

Nadi: Samyak (110 beats per minute - regular)
 Mala: Baddha Koshta (Constipated)
 Mutra: 5-6 times /day
 Jihwa: Niraam
 Shabda: Prakruta
 Sparsha: Ruksha
 Drik: Prakrusta
 Akrti: Magdhyama

MATERIAL AND METHOD**Centre of Study**

This study was carried out in OPD of Kayachikitsa Department
 Shri Ayurved College, Nagpur

Study Design: Single Case Study**Samprapti Ghataka**

Dosha - Tridosha (Pitta-Vata pradhana)
 Dushya – Rasa, Rakta, Mamsa, Medas
 Adhishtana – Twak

Assessment Score Chart (asc)

Assessment of case was done on the basis of ASC

Score	0	1	2	3
Type	No Improvement	Stationary	Resistant	Progressive
Site of Lesion		Follicular	Mucosal	Aeral
Number of Patches	Absent	Single Patch	Segmentary	Generalized
Margin of Patches		Normal	Inflamed	
Colour of Patches	Normal	Pigment Spot on Patch	Pink	Milky White
Re-pigmentation	Fully Pigmented	Perifollicular Pigmentation	Hyper Pigmentation of Margin	No Pigmentation

Baseline Assessment Score of the Patient on First Visit

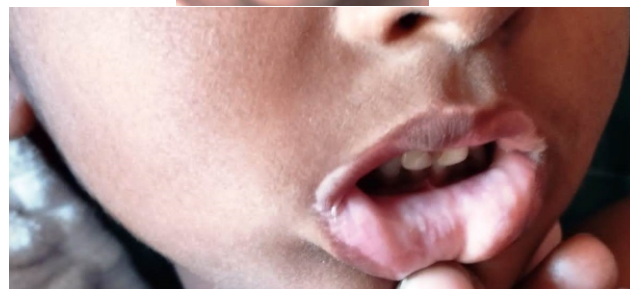
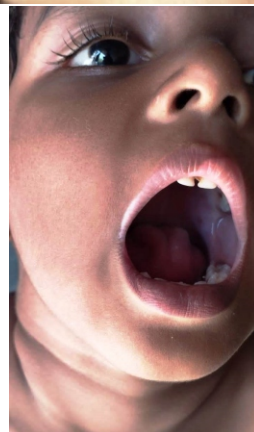
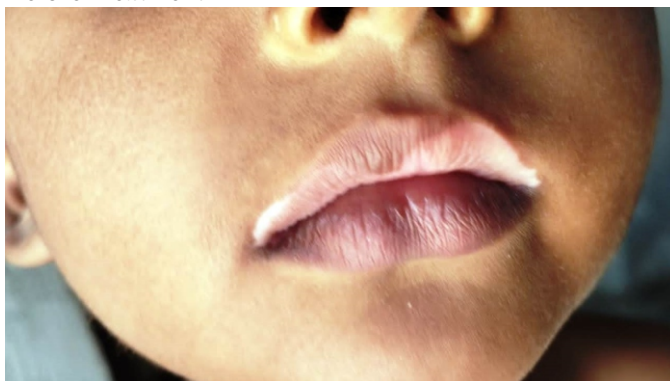
Score	0	1	2	3
Site of Lesion			Mucosal	
Number of Patches				Progressive
Margin of Patches			Segmentary	
Colour of Patches				Milky White
Re-pigmentation				No Pigmentation

Treatment Plan:

Patient Was Treated on OPD Basis. Oral Medication.

Medication	Dose	Time of Administration
1. Swayambhu Guggulu	½ tab	Twice a day
2. Bakuchi Churna	1gm + Mandukparni Churna 1gm + Krushna Tulsi Churna 1gm (Kwath)	10ml twice a day
3. Somraji Oil	L/A	twice a day
4. Gandhaka Rasayan	½ tab	twice a day
5. Khadirarishta	5ml	Twice a day

Follow Up: Patient had been followed up every 15 days. After 6 months of follow-up, there has been no recurrence of pigmented areas. Before and after treatment patch changes are being represented in the figure.

Before Treatment

After Treatment



Assessment After The Treatment

Signs and Symptoms	Before Treatment	After Treatment (After 5 month)
Type	Score 3	Stationary with score 1
Number of Patches	Score 2	Absent with score 0
Colour of Patches	Milky white Score 3	Reddish Pink Normal with score 0
Re-pigmentation	No pigmented score 3	

Observation And Results

The patient was monitored for 6 months to observe if there were any changes in skin pigmentation during the Shaman Chikitsa. The de-pigmented areas were reddish and scratchy initially, indicating that the treatment was proceeding with no new spots emerging since the diagnosis. After 4-5 months, normal pigmented patches began to appear in the affected areas. After 6 months of the same treatment, Re-pigmentation proceeded and patches were noticed to change. Within six months, the bulk of the skin had returned to normal pigmentation. Regular oral use of *Swayambhu Guggulu*¹⁰, *Bakuchi Churna*¹⁵ 1gm + *Mandukparni Churna*¹⁴ 1gm + *Krushna Tulsi Churna*¹⁶ 1gm (Kwath), *Gandhaka Rasayan*¹¹, *Khadirarishta*¹³ and other ingredients with local application of s reduces the size of vitiligo and changes the appearance of patches from white to normal skin colour. In this case, for further study and investigation, the treatment is continued.

DISCUSSION

In allopathic medicine, the main cause of vitiligo is autoimmune, genetic, psychological, endocrine, chemical and adverse drug

interaction in modern medical sciences, so mainly photosensitizers and blood purifiers are used. *Shwitra* is *Deergha Roga* in Ayurveda and should be treated immediately. *Khadirarishta*¹³ main ingredients include *Khadira extract* (*Acasia Catechu*). *Khadirarishta* is a polyherbal ayurvedic formulation which is used in the treatment of various skin conditions. It is a rich source of powerful anti-oxidant that destroys free radicals and flushes out toxin waste from the body. *Khadirarishta* has Shothahara (anti-inflammatory) and Shodhan (detoxification) properties, which help purify the blood and hence reduce skin problems. It also helps to reduce scars, blemishes, and dark spots. According to Ayurveda, it also has Krimighna (anti-worm) properties. *Gandhaka Rasayan*¹¹ keeps the Tridoshas (Vata, Pitta and Kapha) calm. It is blood purifier and good for skin diseases. It has many medicinal Properties-Antioxidant, Antipruritic, purifies blood, Neuro protective and anti-inflammatory. *Swayambhu Guggulu*¹⁰ helps to eliminate toxins from the body and It is helpful in skin diseases. Main contents of *Bakuchi Churna*¹⁵, *Mandukparni Churna*¹⁴ and *Krushna Tulsi Churna*¹⁶ are Raktashodhak and Twachya. So are extremely functional in skin condition. These churna has Deepana (Increase the secretion of gastric enzymes), Ruchikara (Tasty), Baladayani (Increase the body strength), Medhya and Kusthghna properties. Somraji oil¹² is an Ayurvedic medicinal oil prepared from the *curcuma longa* (*Haridra*) and *pongamia pinnata* (*karanj*), *Azadirachta indica* (*neem*) for treatment of dermatitis in Ayurveda. *Bakuchi churna* is extract of *Bakuchi* seed which contains Psoralens as an active ingredient. It is a plant bases chemical which boost the amount of ultraviolet light the skin absorbs. This lets the light into the skin. The ultraviolet radiation helps treat severe skin diseases like vitiligo. Psoralen stimulates repigmentation by sensitizing the skin to ultraviolet light. Photo chemotherapy is very valuable for the treatment of vitiligo. Psoralen has good photochemical response to ultraviolet rays. Because of this reason the treatment includes topical/oral treatment, followed by exposure to ultraviolet light or Sunlight.

After successful recovery of this case, it can be said that Ayurveda medication is useful in vitiligo without any adverse effect and many other studies also give successful results. In oral treatment the drug first affects the blood and via blood reaches to the epidermis while in topical treatment the drug direct effects the epidermis thus topical treatments are faster than oral treatments.

CONCLUSION

However, this case illustrates the best results of Ayurvedic treatment in vitiligo without any side effect. *Somraji oil*¹² for local application, *Swayambhu Guggulu*¹⁰ *Bakuchi Churna*¹⁵ 1gm + *Mandukparni Churna*¹⁴ 1gm + *Krushna Tulsi Churna*¹⁶ 1gm (Kwath), *Gandhaka Rasayan*¹¹ and *Khadirarishta*¹³ are all effective in vitiligo. Morning sun light has additive effect on melanocyte formation. This shows that if treatment is done according to Ayurveda's principles, with proper dosage and duration, as well as strict follow of pathya and apathya Ahara, it leads to success as in this case of vitiligo (Shwitra).

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